



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
PUBLIC HEALTH SERVICE
CENTER FOR DISEASE CONTROL

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April 3, 1980

Mr. William R. Schultz
Assistant General Manager
Technical Services
Goodyear Atomic Corporation
P. O. Box 628
Piketon, Ohio 45661



Dear Mr. Schultz:

I would like to share with you our plans for conducting an epidemiologic study of workers at the Goodyear Atomic Corporation (GAT) plant in Piketon, Ohio. I have asked the major parties involved to review these plans and comment on them to me in writing before May 1, 1980.

NIOSH views that an epidemiologic study of GAT workers is in order for several reasons. First, few studies are available on the long term health consequences of chronic exposure to low dose alpha radiation. Second, GAT provides an opportunity to study a large population with sufficient years of latency between exposure and the present date. Also GAT has available extensive personnel and biological monitoring data that will make such a study feasible. Third, workers with potential exposure will remain deeply concerned for their own adverse health effects, as well as managers for the safety of the workers they supervise, until such an epidemiologic study adequately defines the health status of the population.

The mechanics of such an epidemiologic study are as follows. Computer tapes currently in the possession of GAT containing demographic information for active and inactive workers and work history information for active employees will be augmented by NIOSH to include work history on inactive employees (file 1). Second, a partial listing of deceased inactive employees (file 2), also in the possession of GAT, will be linked to file 1 and a list of inactive employees not thought to be deceased will be submitted to various agencies by NIOSH (e.g., Social Security Administration, Ohio Department of Motor Vehicles, etc.) for determination of vital status. Third, computerized files (file 3) of urinalysis held by GAT of individual workers analyzed for uranium, alpha emissions and other metals, as well as in vivo scanning, will be sorted by NIOSH or GAT to determine historically which departments were thought by GAT health physicists to be at potential exposure and hence were included in biological monitoring. Fourth, based on results of routine

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urinalysis and testing subsequent to incidents, departments in the potential exposure category will be further graded as to degree of potential exposure. All the previously described information will then be used to compare the mortality experience of workers in departments with varied potential radiation exposures to departments with workers without such potential, and to suitable populations outside the facility such as U.S. vital statistics. If excess mortality for specific disease categories is discovered, such as lung cancer, the exposure experience of cases of that disease will then be compared with individuals not suffering from such diseases. This case-control approach may help identify jobs or departments where hazards were present. It should be noted that confidentiality of the records in the possession of NIOSH are maintained in accordance with provisions of the Privacy Act of 1974 (5 United States Code, Section 552a); and of U.S. Public Health Service regulations contained in Title 42, Part 1, of the Code of Federal Regulations and of the Department of Health, Education, and Welfare.

To elucidate potentials for present exposure to radiation as well as to other industrial toxins and to characterize past experiences, a parallel effort in industrial hygiene characterization will be launched.

Given the size of both plant and work force, NIOSH will ask representatives of OCAW and GAT each to rank independently the twenty jobs with occupational exposures most likely to offer adverse health consequences. NIOSH will merge these priorities and survey, if feasible, each in turn. We expect these results to be available considerably before results of the epidemiologic studies. In fact, the industrial hygiene survey can serve to target the epidemiologic studies. In addition, NIOSH may survey other jobs as indicated by the results of the epidemiologic studies mentioned above.

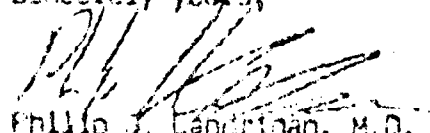
I forced starting the epidemiologic studies shortly after review of these plans and industrial hygiene survey as soon as appropriate security clearances for NIOSH industrial hygienists can be approved.

Clearly all parties are concerned about time frame and burden on the facility that may interfere with production. From our experience, studies such as this interfere minimally with the daily routines of the

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Industries studied. In summation, I am asking the addressees to review and comment on the broad outlines described here in by May 1, 1983. Subsequently, NIOSH will share more detailed plans and begin a study as outlined.

Sincerely yours,


Philip J. Landrigan, M.D.
Director
Division of Surveillance, Hazard
Evaluations and Field Studies

cc:

Senator Howard Metzenbaum
Congressman Bob Eckhardt
Senator John Glenn
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